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SERIAL NUMBER 10/634,624	FILING DATE 08/05/2003  RULE	CLASS 604	GROUP ART UNIT 3767	ATTORNEY DOCKET NO. 003 29
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APPLICANTS

Marshall S. Kriesel, St. Paul, MN;

\*\* CONTINUING DATA \*\*\*\*\* *no*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *no*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 11/03/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 28	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 3
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Verified and Acknowledged  
 Examiner's Signature *SP* Initials

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 47360  
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TITLE  
 Infusion apparatus with modulated flow control

FILING FEE  RECEIVED 456	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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